## Case 18-05838 Doc 1 Filed 03/01/18 Entered 03/01/18 10:05:44 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | t 1: Identify Yourself   |  |   |   |
|----|--|--|---|---|
|    |  | About Debtor 1:                                    |   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name   |  |   |   |
|    | Write the name that is on your government-issued picture identification (for example, your driver's                              | Alice<br>First name                                | - | First name                                    |
|    | license or passport).  | Middle name  | - | Middle name                                   |
|    | Bring your picture identification to your meeting with the trustee.  | Popernik  Last name and Suffix (Sr., Jr., II, III) |   | Last name and Suffix (Sr., Jr., II, III)      |
| 2. | All other names you have used in the last 8 years  |  |   |   |
|    | Include your married or maiden names.  |  |   |   |
| 3. | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-6386  |   |   |

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Case number (if known)

Debtor 1 Alice Popernik

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 126 Harbor Landing Braidwood, IL 60408 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Will County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Alice Popernik

| ar  | Tell the Court About  | Your E | Bankruptcy Ca  | ise                                |  |   |            |
|-----|---|--------|----------------|------------------------------------|--|---|------------|
| 7.  | The chapter of the Bankruptcy Code you are  |        |                |                                    | of each, see <i>Notice Required by</i> f page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bar<br>e box.   | nkruptcy   |
|     | choosing to file under  |        | Chapter 7      |                                    |  |   |            |
|     |   |        | Chapter 11     |                                    |  |   |            |
|     |   |        | Chapter 12     |                                    |  |   |            |
|     |   |        | Chapter 13     |                                    |  |   |            |
|     |   |        |                |                                    |  |   |            |
| 3.  | How you will pay the fee  |        | about how yo   | ou may pay. Typ<br>attorney is sub | pically, if you are paying the fee yo                                    | k with the clerk's office in your local court for mourself, you may pay with cash, cashier's check alf, your attorney may pay with a credit card or | , or money |
|     |   |        |                |                                    | tallments. If you choose this options (Official Form 103A).              | on, sign and attach the Application for Individua   | als to Pay |
|     |   |        | I request tha  | t my fee be wa                     | aived (You may request this option                                       | n only if you are filing for Chapter 7. By law, a ju  |            |
|     |   |        | applies to you | ur family size ar                  | nd you are unable to pay the fee in                                      | ur income is less than 150% of the official poven installments). If you choose this option, you maid. Form 103B) and file it with your petition.    |            |
|     |   |        | ше Аррисан     | on to nave the t                   | Shapter 7 Filling Fee Walved (Onic                                       | aar om 1035) and me it with your petition.  |            |
| ).  | Have you filed for bankruptcy within the  | ■ N    | 0.             |                                    |  |   |            |
|     | last 8 years?   | ☐ Y    | es.            |                                    |  |   |            |
|     |   |        | District       |                                    | When   | Case number   |            |
|     |   |        | District       |                                    | When   | Case number   |            |
|     |   |        | District       |                                    | When   | Case number   |            |
| 10. | Are any bankruptcy  | ■ N    | 0              |                                    |  |   |            |
|     | cases pending or being<br>filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an | □ Y    | es.            |                                    |  |   |            |
|     | affiliate?  |        |                |                                    |  |   |            |
|     |   |        | Debtor         |                                    |  | Relationship to you   |            |
|     |   |        | District       |                                    | When   | Case number, if known   |            |
|     |   |        | Debtor         |                                    | NA/Is a se   | Relationship to you   |            |
|     |   |        | District       |                                    | When   | Case number, if known   |            |
| 11. | Do you rent your residence?   | ■ N    | o. Go to I     | ine 12.                            |  |   |            |
|     | residence:  | ΠY     | es. Has yo     | our landlord obta                  | ained an eviction judgment agains  | t you?  |            |
|     |   |        |                | No. Go to line                     | 12.  |   |            |
|     |   |        |                | Yes. Fill out In                   |  | Judgment Against You (Form 101A) and file it a  | as part of |
|     |   |        |                |                                    |  |   |            |

Document Page 4 of 48 Case number (if known) Alice Popernik Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Alice Popernik

Part 5: Explain Your E

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

| I received a briefing from an approved credit             |
|---|
| counseling agency within the 180 days before I filed      |
| this bankruptcy petition, and I received a certificate of |
| completion.   |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb  | tor 1 Alice Popernik   |                                | Document   | Case ni   | umber (if known)  |
|------|--|--------------------------------|--|---|---|
| Part | 6: Answer These Quest  | ions for Re <sub>l</sub>       | porting Purposes   |   |   |
| 16.  | What kind of debts do you have?                                |                                | Are your debts primarily consurndividual primarily for a personal,         |   | e defined in 11 U.S.C. § 101(8) as "incurred by an  |
|      |  |                                | ☐ No. Go to line 16b.  |   |   |
|      |  |                                | Yes. Go to line 17.  |   |   |
|      |  |                                | Are your debts primarily busine money for a business or investment         |   |   |
|      |  | 1                              | ☐ No. Go to line 16c.  |   |   |
|      |  | l                              | ☐ Yes. Go to line 17.  |   |   |
|      |  | 16c. :                         | State the type of debts you owe th   | at are not consumer debts or bu   | siness debts  |
| 17.  | Are you filing under Chapter 7?                                | □ No.                          | am not filing under Chapter 7. Go  | to line 18.   |   |
|      | Do you estimate that after any exempt property is excluded and |                                | am filing under Chapter 7. Do you<br>are paid that funds will be available |   | property is excluded and administrative expenses itors?   |
|      | administrative expenses are paid that funds will               | I                              | No   |   |   |
|      | be available for<br>distribution to unsecured<br>creditors?    |                                | ☐ Yes  |   |   |
| 18.  | How many Creditors do you estimate that you owe?               | ■ 1-49<br>□ 50-99<br>□ 100-199 |  | ☐ 1,000-5,000<br>☐ 5001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000   |
|      |  | □ 200-999                      | )  |   |   |
| 19.  | How much do you estimate your assets to be worth?              | □ \$100,00                     | 0,000<br>  - \$100,000<br>  1 - \$500,000<br>  1 - \$1 million             | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millior | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| 20.  | How much do you estimate your liabilities to be?               | □ \$100,00                     | 0,000<br>1 - \$100,000<br>01 - \$500,000<br>01 - \$1 million               | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millior | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| Part | :7: Sign Below   |                                |  |   |   |
| For  | you  |                                | •  |   | information provided is true and correct.   |
|      |  |                                |  |   | gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.                                  |
|      |  |                                | ey represents me and I did not pa<br>I have obtained and read the noti     |   | is not an attorney to help me fill out this b).   |
|      |  | I request re                   | elief in accordance with the chapte  | er of title 11, United States Code  | , specified in this petition.   |
|      |  |                                | case can result in fines up to \$25  |   | ney or property by fraud in connection with a p 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519.                          |
|      |  | Alice Pol<br>Signature         | pernik   | Signature of D  | Debtor 2  |
|      |  | Executed of                    | March 1, 2018<br>MM / DD / YYYY  | Executed on   | MM / DD / YYYY  |
|      |  |                                |  |   |   |

Debtor 1 Alice Popernik Document Page 7 of 48 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ C. David Ward                      | Date          | March 1, 2018        |
|--|---------------|----------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY       |
|  |               |                      |
| C. David Ward                          |               |                      |
| Printed name                           |               |                      |
| C. David Ward                          |               |                      |
| Firm name                              |               |                      |
| 1234 Douglas Road                      |               |                      |
| Oswego, IL 60543                       |               |                      |
| Number, Street, City, State & ZIP Code |               |                      |
| Contact phone <b>630-554-3065</b>      | Email address | cdward1945@yahoo.com |
| 2938065 Illinois IL                    |               |                      |
| Bar number & State                     |               |                      |

|                        |                          | Docum             | ent Page 8 of 4 | 18 | •                                    |
|------------------------|--------------------------|-------------------|-----------------|----|--------------------------------------|
| Fill in this infor     | mation to identify your  | case:             |                 |    |                                      |
| Debtor 1               | Alice Popernik           |                   |                 |    |                                      |
|                        | First Name               | Middle Name       | Last Name       |    |                                      |
| Debtor 2               |                          |                   |                 |    |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name       |    |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS     |    |                                      |
| Case number (if known) |                          |                   |                 |    | ☐ Check if this is an amended filing |
|                        |                          |                   |                 |    | _                                    |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your as     | ssets<br>of what you own      |
|-----|--|-------------|-------------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 0.00                          |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 904.66                        |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 904.66                        |
| Pai | t 2: Summarize Your Liabilities  |             |                               |
|     |  |             | <b>abilities</b><br>t you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D             | \$          | 5,673.00                      |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | \$          | 0.00                          |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 32,723.90                     |
|     | Your total liabilities   | \$          | 38,396.90                     |
| Paı | t 3: Summarize Your Income and Expenses  |             |                               |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 918.00                        |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 962.00                        |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records   |             |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                                 | r other sch | nedules.                      |
| 7.  | ■ Yes What kind of debt do you have?   |             |                               |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bounded purpose "11 U.S.C. § 101(9). Fill out lines \$ 00 for deticitied purposes 38 U.S.C. § 150 | personal,   | family, or                    |

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |  |
|----|--|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |  |

0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

| responsible for si<br>your name and cas  | Check if this is an amended filing  12/15  In the category where you upplying correct ie number (if known). |
|--|---|
| responsible for size of the si | amended filing  12/15  the category where you upplying correct e number (if known).                         |
| responsible for size of the si | amended filing  12/15  The category where you upplying correct te number (if known).                        |
| responsible for size of the si | amended filing  12/15  The category where you upplying correct te number (if known).                        |
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| responsible for size of the si | n the category where you<br>upplying correct<br>e number (if known).  |
| responsible for size of the si | n the category where you<br>upplying correct<br>e number (if known).  |
| responsible for size of the si | upplying correct e number (if known).   |
|  | ehicles you own that  |
| <b>ories</b><br>es   |   |
|  |   |
|  |   |
|  | laims or exemptions. Put ed claims on Schedule D:   |
| itors Who Have Cla   | ims Secured by Property.  |
|  | Current value of the portion you own?   |
| ,  |   |
| Unknown  | Unknowr   |
| 1  | amount of any secur-<br>ditors Who Have Cla<br>rent value of the<br>re property?                            |

Official Form 106A/B Schedule A/B: Property

page 1

|       | o you own or have any legal or equitable interest in any of the following items?  | Current value of the  |
|-------|---|---|
|       |   | portion you own?  Do not deduct secured claims or exemptions. |
| 6.    | Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware   |   |
|       | ■ No  |   |
|       | ☐ Yes. Describe   |   |
| 7.    | Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music col including cell phones, cameras, media players, games  ■ No | llections; electronic devices                                 |
|       | ☐ Yes. Describe   |   |
| 8.    | Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, cother collections, memorabilia, collectibles | or baseball card collections;                                 |
|       | ■ No □ Yes. Describe  |   |
| 9.    | Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ar musical instruments                   | nd kayaks; carpentry tools;                                   |
|       | ■ No □ Yes. Describe  |   |
| 10    | Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  ■ No  □ Yes. Describe   |   |
| 11    | Clothes   |   |
| • • • | Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  ■ No  |   |
|       | Yes. Describe   |   |
| 12.   | Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go  ■ No  □ Yes. Describe   | old, silver   |
| 13.   | Non-farm animals  Examples: Dogs, cats, birds, horses  ■ No   |   |
|       | Yes. Describe   |   |
| 14.   | Any other personal and household items you did not already list, including any health aids you did not list   No  |   |
|       | ☐ Yes. Give specific information  |   |
| 15    | 5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here  | \$0.00  |
| Pa    | rt 4: Describe Your Financial Assets  |   |
| D     | you own or have any legal or equitable interest in any of the following?  | Current value of the portion you own?                         |

claims or exemptions.

16. Cash

Debtor 1

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

| Debtor 1                  | Alice Poperni                              | <u>k</u>  | Document Page 12 of 48 Case number (if known)   |                    |
|---------------------------|--|---|---|--------------------|
| Yes                       |  |   |   |                    |
|                           |  |   | Cash  | \$15.0             |
|                           |  |   | ounts; certificates of deposit; shares in credit unions, brokerage houses, and with the same institution, list each.                        | d other similar    |
|                           |  |   | Institution name:   |                    |
| _ 105                     |  | 17.1. Checking  | USBank Joint account with Patsy Derbas, sister. Only money into account is Debtor's social security check.                                  | \$719.6            |
| Examp<br>■ No             |  | r publicly traded stocks nvestment accounts with bro  | okerage firms, money market accounts  |                    |
| 19. <b>Non-p</b> ı        |  | ck and interests in incorpo                           | orated and unincorporated businesses, including an interest in an LL0   | C, partnership, an |
| ☐ Yes.                    | Give specific info                         | rmation about them<br>Name of entity:                 | <br>% of ownership:   |                    |
| Negot                     | iable instruments in                       | nclude personal checks, cas                           | otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them. |                    |
| ☐ Yes.                    | Give specific infor                        | mation about them<br>Issuer name:                     |   |                    |
| Exam <sub>l</sub>         | ment or pension a<br>ples: Interests in IR |   | 103(b), thrift savings accounts, or other pension or profit-sharing plans   |                    |
| ■ No<br>□ Yes.            | List each account                          | separately.  Type of account:                         | Institution name:   |                    |
| Your s<br><i>Exam</i>     |  | deposits you have made so                             | o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or other       | ers                |
| ■ No<br>□ Yes.            |  |   | Institution name or individual:   |                    |
| 23. <b>Annuit</b>         | ties (A contract for                       | a periodic payment of mone                            | ey to you, either for life or for a number of years)  |                    |
| ■ No<br>□ Yes             | lssu                                       | uer name and description.                             |   |                    |
|                           |  | n IRA, in an account in a q<br>29A(b), and 529(b)(1). | ualified ABLE program, or under a qualified state tuition program.  |                    |
| ☐ Yes                     | Inst                                       | itution name and description                          | n. Separately file the records of any interests.11 U.S.C. § 521(c):   |                    |
| 25. <b>Trusts</b><br>■ No | , equitable or futu                        | re interests in property (o                           | other than anything listed in line 1), and rights or powers exercisable fo  | or your benefit    |
|                           | Give specific info                         | rmation about them                                    |   |                    |
|                           |  |   | nd other intellectual property<br>eds from royalties and licensing agreements   |                    |

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

| Del | btor 1                   | Alice Popernik  | Document                                     | Page 13 of 48  Case number (if known)                   |   |
|-----|--------------------------|---|--|---|---|
| 27. | License<br>Examp<br>■ No | es, franchises, and other general intang  |  | n holdings, liquor licenses, professional license       | es  |
| Мо  | ney or                   | property owed to you?   |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| I   | No                       | unds owed to you  Give specific information about them, inclu   | uding whether you alre                       | eady filed the returns and the tax years                |   |
| ı   | Examp<br>■ No            | support  oles: Past due or lump sum alimony, spous  Give specific information   | al support, child supp                       | ort, maintenance, divorce settlement, property          | settlement  |
| ı   | Examp<br>■ No            | mounts someone owes you  bles: Unpaid wages, disability insurance pa benefits; unpaid loans you made to so  Give specific information |  | nefits, sick pay, vacation pay, workers' comper         | nsation, Social Security  |
| _   |                          | ts in insurance policies<br>bles: Health, disability, or life insurance; he   | alth savings account                         | HSA); credit, homeowner's, or renter's insuran          | nce   |
| ı   | Yes.                     | Name the insurance company of each poli<br>Company name:  | icy and list its value.                      | Beneficiary:  | Surrender or refund value:  |
|     |                          |   | nsurance Compar<br>. Policy date 10-4<br>.00 |   | \$170.00  |
| ı   | If you a someo           | erest in property that is due you from sare the beneficiary of a living trust, expect ne has died.  Give specific information         | omeone who has di<br>proceeds from a life ir | ed<br>surance policy, or are currently entitled to rece | eive property because   |
| ı   | Examp<br>■ No            | against third parties, whether or not your less: Accidents, employment disputes, insure Describe each claim                           |  |   |   |
| I   | No                       | contingent and unliquidated claims of e   | very nature, includir                        | g counterclaims of the debtor and rights to             | set off claims  |
| 1   | No                       | ancial assets you did not already list Give specific information  |  |   |   |
| 36. |                          | he dollar value of all of your entries froi<br>irt 4. Write that number here  |  | ny entries for pages you have attached                  | \$904.66  |
| Par | t 5: Des                 | scribe Any Business-Related Property You O  | wn or Have an Interest                       | In. List any real estate in Part 1.                     |   |

Official Form 106A/B Schedule A/B: Property page 4

|                | Case 18-058   | 338 Doc 1             | Filed 03/01/18<br>Document  | Entered 03<br>Page 14 of | 3/01/18 10:05:44<br>48   | Desc Main            |
|----------------|---|-----------------------|-----------------------------|--------------------------|--------------------------|----------------------|
| Debto          | or 1 Alice Popernik                                       |                       |                             |                          | Case number (if known)   |                      |
| 37. <b>D</b> c | you own or have any legal o                               | or equitable interest | in any business-related p   | roperty?                 |                          |                      |
|                | No. Go to Part 6.   |                       |                             |                          |                          |                      |
|                | es. Go to line 38.  |                       |                             |                          |                          |                      |
|                |   |                       |                             |                          |                          |                      |
| Part 6         | Describe Any Farm- and O                                  |                       |                             | n or Have an Interes     | st In.                   |                      |
| 46. <b>D</b>   | o you own or have any le                                  | gal or equitable in   | nterest in any farm- or     | commercial fishir        | ng-related property?     |                      |
| _              | No. Go to Part 7.   | J                     | , ,                         |                          | J                        |                      |
|                | Yes. Go to line 47.                                       |                       |                             |                          |                          |                      |
|                |   |                       |                             |                          |                          |                      |
| Part 7         | Describe All Property                                     | y You Own or Have a   | an Interest in That You Did | d Not List Above         |                          |                      |
|                |   |                       |                             |                          |                          |                      |
|                | o you have other property<br>Examples: Season tickets, of |                       |                             |                          |                          |                      |
|                | No  | souring order mornio  | 5. 5p                       |                          |                          |                      |
|                | Yes. Give specific informa                                | tion                  |                             |                          |                          |                      |
|                |   | l                     |                             |                          |                          |                      |
|                |   |                       |                             |                          | ors' best estimate of    | \$0.00               |
|                |   | iali illaiket vali    | ue in a liquidation sa      | aie.                     |                          |                      |
|                |   |                       |                             |                          |                          |                      |
| 54.            | Add the dollar value of al                                | l of your entries fr  | om Part 7. Write that n     | umber here               |                          | \$0.00               |
|                |   |                       |                             |                          |                          |                      |
| Part 8         | List the Totals of Each                                   | n Part of this Form   |                             |                          |                          |                      |
| 55             | Part 1: Total real estate, l                              | ino 2                 |                             |                          |                          | \$0.00               |
|                | Part 2: Total vehicles, line                              |                       |                             | \$0.00                   |                          | φυ.υυ                |
|                | Part 3: Total personal and                                |                       | <br>s. line 15              | \$0.00                   |                          |                      |
|                | Part 4: Total financial ass                               |                       |                             | \$904.66                 |                          |                      |
|                | Part 5: Total business-rel                                | •                     |                             | \$0.00                   |                          |                      |
|                | Part 6: Total farm- and fis                               |                       |                             | \$0.00                   |                          |                      |
|                | Part 7: Total other proper                                |                       |                             | \$0.00                   |                          |                      |
| 00             | T-1-1   | A                     |                             |                          | 0                        |                      |
| 62.            | Total personal property.                                  | Add lines 56 throug   | n 61                        | \$904.66                 | Copy personal property t | otal <b>\$904.66</b> |
|                |   |                       |                             |                          |                          |                      |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$904.66

|                          |   |   | Document   |                          | 2age 15 of 48   |  |  |
|--------------------------|---|---|--|--------------------------|---|--|--|
| Fil                      | II in this informa  | ation to identify your ca   |  |                          |   |  |  |
| De                       | ebtor 1   | Alice Popernik  |  |                          |   |  |  |
| _                        | 10  | First Name  | Middle Name  | L                        | ast Name  |  |  |
|                          | ebtor 2<br>oouse if, filing)  | First Name  | Middle Name  | L                        | ast Name  |  |  |
| Ur                       | nited States Bank   | kruptcy Court for the:  | NORTHERN DISTRICT OF   | LLIN                     | OIS   |  |  |
| Ca                       | ase number  |   |  |                          |   |  |  |
|                          | known)  |   |  |                          |   |  | Check if this is an amended filing                                       |
| Ο.                       | fficial For   | m 106C  |  |                          |   |  |  |
|                          |   | <del></del>   | perty You Cla  | im                       | as Exempt   |  | 4/16   |
| the<br>nee               | property you list<br>eded, fill out and<br>se number (if kno                  | ted on Schedule A/B: Pro<br>attach to this page as ma<br>own).                | perty (Official Form 106A/B)<br>any copies of <i>Part 2: Additior</i>                  | as yo<br>nal Pa          | ther, both are equally responsible for source, list the property that you ge as necessary. On the top of any pount of the exemption you claim.      | claim as ex<br>additional p                | tempt. If more space is pages, write your name and                       |
| spe<br>any<br>fun<br>exe | ecific dollar and<br>y applicable stated<br>ads—may be un<br>emption to a par | ount as exempt. Alterna<br>tutory limit. Some exem<br>limited in dollar amoun | tively, you may claim the f<br>ptions—such as those for<br>t. However, if you claim an | ull fai<br>healt<br>exen | ir market value of the property be<br>th aids, rights to receive certain k<br>nption of 100% of fair market valu<br>letermined to exceed that amoun | ing exempt<br>benefits, an<br>le under a l | ted up to the amount of<br>d tax-exempt retirement<br>aw that limits the |
| Pa                       | rt 1: Identify  | the Property You Claim  | as Exempt  |                          |   |  |  |
| 1.                       | Which set of e  | exemptions are you clai   | ming? Check one only, ever   | n if yo                  | ur spouse is filing with you.   |  |  |
|                          | You are clai  | ming state and federal no   | onbankruptcy exemptions. 1   | 11 U.S                   | S.C. § 522(b)(3)  |  |  |
|                          | ☐ You are clai  | ming federal exemptions   | 11 U.S.C. § 522(b)(2)  |                          | - ,,,,,   |  |  |
| 2.                       |   |   |  | mpt.                     | fill in the information below.  |  |  |
|                          | Brief description   | n of the property and line of   | n Current value of the   | • •                      | ount of the exemption you claim   | Specific la                                | ws that allow exemption  |
|                          | Schedule A/B th   | nat lists this property   | portion you own  Copy the value from  Schedule A/B                                     | Che                      | eck only one box for each exemption.  |  |  |
|                          | Cash  | 1.1.4/0.464   | \$15.00  |                          | \$15.00   | 735 ILC                                    | S 5/12-1001(b)   |
|                          | Line from Sche  | edule A/B: 1 <b>6.</b> 1  |  |                          | 100% of fair market value, up to any applicable statutory limit   |  |  |
|                          |   | SBank Joint accour  | nt \$719.66  |                          | \$719.66  | 735 ILC                                    | S 5/12-1001(b)   |
|                          |   |   |  |                          | 100% of fair market value, up to any applicable statutory limit   |  |  |
|                          | Physicians I  | _ife Insurance Compa  | any \$170.00   | _                        | \$170.00  | 735 ILC                                    | S 5/12-1001(b)   |
|                          |   | Dlicy. Policy date<br>h value \$170.00<br>edule A/B: 31.1                     |  |                          | 100% of fair market value, up to any applicable statutory limit   |  |  |
| _                        |   |   | Alam of many their \$400.00  |                          |   |  |  |
| 3.                       |   |   | otion of more than \$160,379<br>every 3 years after that for ca                        |                          | led on or after the date of adjustme  | nt.)                                       |  |
|                          | ☐ Yes. Did y  | you acquire the property of   | covered by the exemption wi  | thin 1                   | ,215 days before you filed this case  | ?  |  |

☐ Yes

☐ No

| =::: 4::: 6                                | 10 00000                                     | Document   | Page 16  | of 48  |  | Tall I                   |
|--|--|--|--|--|--|--------------------------|
| Fill in this information                   | on to identify you                           | ır case:   |  |  |  |                          |
| _  | Alice Popernik                               |  |  |  |  |                          |
| Debtor 2                                   | First Name                                   | Middle Name  | Last Name  |  |  |                          |
|  | First Name                                   | Middle Name  | Last Name  |  |  |                          |
| United States Bankru                       | ptcy Court for the:                          | : NORTHERN DISTRICT OF ILL   | INOIS  |  |  |                          |
|  |  |  |  |  |  |                          |
| Case number                                |  |  |  |  | ☐ Check                                      | if this is an            |
|  |  |  |  |  |  | ded filing               |
| Official Form 1                            | 06D  |  |  |  |  |                          |
|  |  | Who Have Claims  | Secure   | d by Propert   | V  | 12/15                    |
|  |  | If two married people are filing together  |  |  | -  | tion. If more space      |
|  |  | out, number the entries, and attach it t   |  |  |  |                          |
| 1. Do any creditors hav                    | e claims secured by                          | y your property?   |  |  |  |                          |
|  | •  | his form to the court with your other  | schedules. Yo                                    | ou have nothing else t                                 | o report on this form.                       |                          |
| ■ Yes. Fill in all                         | of the information                           | below.   |  | Ç  | ·  |                          |
| Part 1: List All Se                        | ecured Claims                                |  |  |  |  |                          |
|  |  | more than one secured claim, list the cre-   | ditor separately                                 | Column A   | Column B                                     | Column C                 |
| for each claim. If more t                  | than one creditor has                        | s a particular claim, list the other creditors<br>cal order according to the creditor's name   | s in Part 2. As                                  | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Mc Henry Sa                            | vings Bank                                   | Describe the property that secures t   | the claim:                                       | \$5,673.00   | Unknown                                      | Unknown                  |
| Creditor's Name  353 Bank Dri Mc Henry, IL |  | boat Boat purchased in 2010 (a p boat) and in the possession debtor's estranged husband Debtor has no further inform and is not in contact with he estranged husband. She ha made a payment on it but th curr  As of the date you file, the claim is: apply.  Contingent | of<br>I.<br>nation<br>er<br>s never<br>e loan is |  |  |                          |
| Number, Street, City                       | , State & Zip Code                           | ■ Unliquidated   |  |  |  |                          |
| Who owes the debt?                         | Check one                                    | Disputed  Nature of lien. Check all that apply.  |  |  |  |                          |
| Debtor 1 only                              | 5on one.                                     | ☐ An agreement you made (such as r   | mortgage or sec                                  | cured  |  |                          |
| Debtor 2 only                              |  | car loan)  |  |  |  |                          |
| ☐ Debtor 1 and Debtor                      | 2 only                                       | Statutory lien (such as tax lien, med  | chanic's lien)                                   |  |  |                          |
| At least one of the de                     |  | ☐ Judgment lien from a lawsuit   |  |  |  |                          |
| Check if this claim community debt         | relates to a                                 | ☐ Other (including a right to offset)  |  |  |  |                          |
| Date debt was incurred                     | Opened<br>07/10 Last<br>Active<br>d 11/01/17 | Last 4 digits of account numb  | her 5550   |  |  |                          |
|  | - 11/01/11                                   | - Last 7 digits of account fluint  |  |  |  |                          |
| Add the dollar value                       | of your entries in C                         | column A on this page. Write that numl   | ber here:  | \$5,67   | <b>73.00</b>                                 |                          |

Write that number here: \$5,673.00

\$5,673.00

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|   |   | Document  | Page 1                      | 7 of 48   |   |
|---|---|---|-----------------------------|---|---|
| Fill in this  | information to identify your  | case:   |                             |   |   |
| Debtor 1  | Alice Popernik  |   |                             |   |   |
|   | First Name  | Middle Name   | Last Name                   |   |   |
| Debtor 2  | Fi (A)  | ACT III AT  |                             |   |   |
| (Spouse if, filin   | g) First Name   | Middle Name   | Last Name                   |   |   |
| United Stat   | es Bankruptcy Court for the:  | NORTHERN DISTRICT OF IL   | LINOIS                      |   |   |
| Case numb   | oor   |   |                             |   |   |
| (if known)  |   |   |                             |   | ☐ Check if this is an                                     |
|   |   |   |                             |   | amended filing  |
| >(() - 1 - 1 - 1  | E 400E/E  |   |                             |   |   |
|   | Form 106E/F   | ,, ,, ,, ,,   |                             |   | 40/45   |
|   |   | ho Have Unsecured   |                             | Part 2 for creditors with NONPRIORIT  | 12/15   |
| Schedule G:<br>Schedule D:<br>eft. Attach the<br>ame and ca | Executory Contracts and Unexp<br>Creditors Who Have Claims Sec<br>ne Continuation Page to this pag<br>se number (if known). | ired Leases (Official Form 106G). I<br>ured by Property. If more space is<br>le. If you have no information to re | Do not include needed, copy | contracts on Schedule A/B: Property (<br>any creditors with partially secured c<br>the Part you need, fill it out, number t<br>do not file that Part. On the top of any | claims that are listed in the entries in the boxes on the |
|   | List All of Your PRIORITY Ur  |   |                             |   |   |
| •   | creditors have priority unsecure  | d claims against you?   |                             |   |   |
|   | Go to Part 2.   |   |                             |   |   |
| ☐ Yes.  |   |   |                             |   |   |
| Part 2:   | List All of Your NONPRIORIT   | Y Unsecured Claims  |                             |   |   |
| 3. Do any   | creditors have nonpriority unsec  | cured claims against you?   |                             |   |   |
| □ No. \   | You have nothing to report in this p  | art. Submit this form to the court with   | your other sche             | edules.   |   |
| Yes.  |   |   |                             |   |   |
| unsecur   | ed claim, list the creditor separatel   | y for each claim. For each claim liste  | d, identify what t          | b holds each claim. If a creditor has mo<br>type of claim it is. Do not list claims alrea<br>three nonpriority unsecured claims fill o                                  | ady included in Part 1. If more                           |
|   |   |   |                             |   | Total claim   |
| 4.1 <b>Aa</b>   | rgon Agency   | Last 4 digits of acc  | count number                | 3696  | \$70.00   |
| Nor   | npriority Creditor's Name   |   |                             |   |   |
|   | tn: Bankruptcy Departme   | nt When was the deb   | t incurred?                 | Opened 12/15  |   |
|   | 68 Spring Mountain Rd<br>s Vegas, NV 89117  |   |                             |   |   |
|   | mber Street City State Zlp Code   | As of the date you  | file, the claim i           | is: Check all that apply  |   |
| Wh  | o incurred the debt? Check one.   |   |                             |   |   |
|   | Debtor 1 only   | ☐ Contingent  |                             |   |   |
|   | Debtor 2 only   | Unliquidated  |                             |   |   |
|   | Debtor 1 and Debtor 2 only  | ☐ Disputed  |                             |   |   |
|   | At least one of the debtors and an  | other Type of NONPRIO   | RITY unsecured              | d claim:  |   |
|   | Check if this claim is for a com  | munity  |                             |   |   |
| deb   |   | ☐ Obligations arisi   |                             | aration agreement or divorce that you did   | d not   |
|   | •   | report as priority cla  |                             | g plans, and other similar debts  |   |
|   | NO  | □ Debts to pension  |                             |   |   |
|   | Yes   | Other. Specify  | Communic                    | Attorney Clear Rate ations Inc.   |   |

Document Page 18 of 48 Debtor 1 Alice Popernik Case number (if know) 4.2 \$8,203.00 **Acsi Benton** Last 4 digits of account number 5401 Nonpriority Creditor's Name Opened 3/25/17 Last Active **Box 788** When was the debt incurred? 11/04/17 Benton, IL 62812 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No deficiency on repossessed 2008 Chevrolet ☐ Yes Other. Specify Cobalt 4.3 Last 4 digits of account number \$17,608.90 **Appelles** Nonpriority Creditor's Name When was the debt incurred? 3700 Corporate Drive, Ste 240 Columbus, OH 43231 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collections for Fifth Third Bank ☐ Yes 4.4 **Cavalry Portfolio Services** Last 4 digits of account number 2668 \$1,701.00 Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? **Opened 11/16** 500 Summit Lake Ste 400 Valhalla, NY 10595 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset?

■ No

☐ Yes

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Ge Capital

Case 18-05838 Doc 1 Filed 03/01/18 Entered 03/01/18 10:05:44 Desc Main Document Page 19 of 48 Case number (if know)

| Alice Poperlik                                      |  | = Hamber (II know)   |  |
|---|--|--|--|
| Cavalry Portfolio Services                          | Last 4 digits of account number  | 34   | \$408.00                               |
| Attn: Bankruptcy Department 500 Summit Lake Ste 400 | When was the debt incurred? Op   | ened 01/14   |  |
| Number Street City State Zlp Code                   | As of the date you file, the claim is: Ch  | eck all that apply   |  |
| _   | ☐ Contingent   |  |  |
| _   | <u> </u>   |  |  |
|   | •  |  |  |
| •   |  | n:   |  |
|   | ☐ Student loans  |  |  |
| debt Is the claim subject to offset?                | ☐ Obligations arising out of a separation report as priority claims  | agreement or divorce that you did not  |  |
| ■ No  | Debts to pension or profit-sharing plan  | s, and other similar debts   |  |
| Yes   | Other. Specify Collection Attor  | ney Ge Capital   |  |
| Great American Insurance<br>Company                 | Last 4 digits of account number  |  | Unknown                                |
| Nonpriority Creditor's Name 49 E. Fourth St.        | When was the debt incurred?  |  |  |
| Number Street City State Zlp Code                   | As of the date you file, the claim is: Che   | eck all that apply   |  |
| _   | Contingent   |  |  |
| ·   | <u> </u>   |  |  |
|   | <u> </u>   |  |  |
| •   | ' '  | n:   |  |
|   | ☐ Student loans  |  |  |
| debt Is the claim subject to offset?                | ☐ Obligations arising out of a separation report as priority claims  | agreement or divorce that you did not  |  |
| ■ No  | ☐ Debts to pension or profit-sharing plan  | s, and other similar debts   |  |
| Yes   | Other. Specify unsecured cred  | it   |  |
| Keynote Consulting                                  | Last 4 digits of account number 409  | 91   | \$66.00                                |
| 220 West Campus Drive                               | When was the debt incurred? Op   | ened 8/18/11   |  |
| Arlington Heights, IL 60004                         | As of the date you file the claim is: Ch   | ack all that annly   |  |
| Who incurred the debt? Check one.                   | ne of the date yearne, the claim io.   | sor all that apply   |  |
| ■ Debtor 1 only                                     | ☐ Contingent   |  |  |
| Debtor 2 only                                       | Unliquidated   |  |  |
| ☐ Debtor 1 and Debtor 2 only                        | Disputed   |  |  |
| ☐ At least one of the debtors and another           | Type of NONPRIORITY unsecured clair  | n:   |  |
| ☐ Check if this claim is for a community            | ☐ Student loans  |  |  |
| debt Is the claim subject to offset?                | report as priority claims  |  |  |
| ■ No  | Debts to pension or profit-sharing plan  | s, and other similar debts   |  |
| Yes   | ■ Other. Specify Riverside Psycl   | niatric Counse   |  |
|   | Cavalry Portfolio Services  Nonpriority Creditor's Name Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Great American Insurance Company Nonpriority Creditor's Name 49 E. Fourth St. Cincinnati, OH 45202  Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Keynote Consulting Nonpriority Creditor's Name 20 West Campus Drive Suite 102 Arlington Heights, IL 60004 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Arlington Heights, IL 60004 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No | Cavalry Portfolio Services Nonpriority Creditor's Name Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only  As of the date you file, the claim is: Check if this claim is for a community debt  Great American Insurance Company Nonpriority Creditor's Name 49 E. Fourth St. Cincinnati, OH 45202 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only  Debtor 2 only  Collegations arising out of a separation report as priority claims  Contingent  Unliquidated  Disputed Type of NONPRIORITY unsecured claim Type of Nonpriority Creditor's Name 49 E. Fourth St. Cincinnati, OH 45202 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  Check if this claim is for a community debt  Student loans  Debtor 1 and Debtor 2 only  Check if this claim is for a community debt  Nonpriority Creditor's Name 220 West Campus Drives Suite 102 Arlington Heights, IL 60004 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only  Check if this claim is for a community debt  Debtor 1 and Debtor 2 only  Check if this claim is for a community debt  Debtor 1 and Debtor 2 only  Debtor 2 only  Debtor 2 only  Debtor 3 and part and pa | Last 4 digits of account number   5734 |

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Case number (if know)

| Debtor | 1 Alice Popernik   |   | Case number (if know)  |            |
|--------|--|---|--|------------|
| 4.8    | Kohls/Capital One  | Last 4 digits of account number   | 1370   | \$1,458.00 |
|        | Nonpriority Creditor's Name Kohls Credit Po Box 3043 Milwaukee, WI 53201 Number Street City State Zlp Code   | When was the debt incurred?  As of the date you file, the claim   | Opened 11/03 Last Active 8/06/12 is: Check all that apply                      |            |
|        | Who incurred the debt? Check one.  Debtor 1 only   | ☐ Contingent  |  |            |
|        | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only   | ■ Unliquidated □ Disputed   |  |            |
|        | At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No  Yes  | Type of NONPRIORITY unsecured  ☐ Student loans  | aration agreement or divorce that you did not g plans, and other similar debts |            |
|        |  | Other. Specify  |  |            |
| 4.9    | RNR of Missouri LLC Nonpriority Creditor's Name dba Rent N Roll 10929 Page Ave.  | Last 4 digits of account number When was the debt incurred?   |  | \$500.00   |
|        | Saint Louis, MO 63132  Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim  | is: Check all that apply   |            |
|        | ■ Debtor 1 only  | ☐ Contingent  |  |            |
|        | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another   | ■ Unliquidated □ Disputed Type of NONPRIORITY unsecure  | d claim:   |            |
|        | ☐ Check if this claim is for a community debt Is the claim subject to offset?  | _   | aration agreement or divorce that you did not                                  |            |
|        | No   | Debts to pension or profit-sharing  |  |            |
|        | Yes  | Other. Specify unsecured  | credit   |            |
| 4.1    | Security Finance Nonpriority Creditor's Name   | Last 4 digits of account number   | 1605   | \$272.00   |
|        | Sfc Centralized Bankruptcy Po Box 1893 Spartanburg, SC 29304   | When was the debt incurred?   | Opened 5/26/17 Last Active 9/28/17   |            |
|        | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim  | s: Check all that apply  |            |
|        | Debtor 1 only  | Contingent  |  |            |
|        | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | ■ Unliquidated □ Disputed  Type of NONPRIORITY unsecured □ Student loans □ Obligations arising out of a separeport as priority claims | d claim:<br>aration agreement or divorce that you did not                      |            |
|        | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts   |            |
|        | ☐ Yes  | Other. Specify Unsecured  |  |            |

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| or 1 Alice Popernik   |  | Case number (if know)  |                   |
|---|--|--|-------------------|
| Shindler Law Firm   | Last 4 digits of account number  |  | \$1,437.00        |
| Nonpriority Creditor's Name 1990 E. Algonquin, Ste 180 Schaumburg II, 60173 | When was the debt incurred?  |  |                   |
| Number Street City State Zlp Code   | As of the date you file, the claim   | is: Check all that apply   |                   |
| Who incurred the debt? Check one.   |  |  |                   |
| ■ Debtor 1 only   | ☐ Contingent   |  |                   |
| ☐ Debtor 2 only   | Unliquidated   |  |                   |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |                   |
| $\square$ At least one of the debtors and another                           | Type of NONPRIORITY unsecured  | d claim:   |                   |
| ☐ Check if this claim is for a community                                    | ☐ Student loans  |  |                   |
| debt  |  | aration agreement or divorce that you did not  |                   |
| <u> </u>  |  | a plane, and other similar debte   |                   |
|   |  |  |                   |
| ☐ Yes   | Other. Specify unsecured   | credit, case number 17 SC 67   |                   |
| Sun Loan Company  | Last 4 digits of account number  | 3625   | \$600.00          |
| Nonpriority Creditor's Name   |  | Opened 09/17 Last Active   |                   |
| 1000 Leigh Rd Ste E<br>Anna, IL 62906                                       | When was the debt incurred?  | 9/11/17  |                   |
| Number Street City State Zlp Code   | As of the date you file, the claim   | is: Check all that apply   |                   |
| <u> </u>  | _  |  |                   |
| ■ Debtor 1 only   | _  |  |                   |
| ☐ Debtor 2 only   | Unliquidated   |  |                   |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |                   |
| ☐ At least one of the debtors and another                                   |  | d claim:   |                   |
| ☐ Check if this claim is for a community                                    | <u> </u>   |  |                   |
| Is the claim subject to offset?   | report as priority claims  |  |                   |
| No  | Debts to pension or profit-sharing   | g plans, and other similar debts   |                   |
| Yes   | Other. Specify Note Loan   |  |                   |
| THE COLUMN TWO IS   |  |  | <b>*</b> 400.00   |
|   | Last 4 digits of account number  |  | \$400.00          |
| 1000 Leigh Ave., Ste A<br>Anna, IL 62906                                    | When was the debt incurred?  |  |                   |
| Number Street City State ZIp Code   | As of the date you file, the claim   | is: Check all that apply   |                   |
| _   | _  |  |                   |
| ■ Debtor 1 only   | ☐ Contingent   |  |                   |
| ☐ Debtor 2 only   | Unliquidated   |  |                   |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |                   |
| $\square$ At least one of the debtors and another                           | <u></u> '  | d claim:   |                   |
| ☐ Check if this claim is for a community                                    |  |  |                   |
| Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not  |                   |
| ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts   |                   |
| Yes   | ■ Other. Specify unsecured   | credit   |                   |
|   | Shindler Law Firm  Nonpriority Creditor's Name 1990 E. Algonquin, Ste 180 Schaumburg, IL 60173  Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Sun Loan Company Nonpriority Creditor's Name 1000 Leigh Rd Ste E Anna, IL 62906  Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Title Cash of Illinois Nonpriority Creditor's Name 1000 Leigh Ave., Ste A Anna, IL 62906 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No | Shindler Law Firm Nonpriority Creditor's Name 1990 E. Algonquin, Ste 180 Schaumburg, IL 60173 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Is the claim subject to offset? No Debtor 1 sharing Debtor 1 only Sun Loan Company Nonpriority Creditor's Name 1000 Leigh Rd Ste E Anna, IL 62906 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Sun Loan Company Nonpriority Creditor's Name 1000 Leigh Rd Ste E Anna, IL 62906 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only At least one of the debtors and another Check if this claim is for a community debt No Debtor 1 only At least one of the debtors and another Check if this claim is for a community debt No Debtor 1 only At least one of the debtors and another Check if this claim is for a community debt No Debtor 1 only Anna, IL 62906 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only 6 only 7 only 6 only 8 only | Shindler Law Firm |

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Alice Popernik

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total Claim     |
|--------------|-----|---|-----|-----------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|              |     |   |     | Total Claim     |
|              | 6f. | Student loans   | 6f. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>32,723.90 |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>32,723.90 |

| Fill in this infor  | rmation to identify your | case:             |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1            | Alice Popernik           |                   |             |  |
|                     | First Name               | Middle Name       | Last Name   |  |
| Debtor 2            |                          |                   |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |
|                     |                          |                   |             |  |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 RNR of Missouri LLC
dba Rent N Roll
10929 Page Ave.
Saint Louis, MO 63132

State what the contract or lease is for

Rental Purchase Arreement

|   |  | Document  | Page 24 of 48  |   |
|---|--|---|--|---|
| Fill in this                            | s information to identify your   | case:   |  |   |
| Debtor 1                                | Alice Popernik   |   |  |   |
|   | First Name   | Middle Name   | Last Name  | _   |
| Debtor 2<br>(Spouse if, fili            | ing) First Name  | Middle Name   | Last Name  | _   |
|   | ates Bankruptcy Court for the:   | NORTHERN DISTRICT OF I  | LLINOIS  |   |
| _                                       |  |   |  | _   |
| Case num<br>(if known)                  | ber  |   |  | ☐ Check if this is an amended filing  |
|   | ll Form 106H<br><b>dule H: Your Cod</b>  | ebtors  |  | 12/15   |
| people are<br>ill it out, a<br>our name | e filing together, both are equand number the entries in the eand case number (if known) | ally responsible for supplying boxes on the left. Attach the . Answer every question. | correct information. If more space   | accurate as possible. If two married<br>se is needed, copy the Additional Page,<br>he top of any Additional Pages, write      |
|   |  | <b>5</b> , , ,  | •  |   |
| □ No                                    |  |   |  |   |
| ■ Ye                                    | S  |   |  |   |
|   |  |   | ty state or territory? (Community pr<br>Rico, Texas, Washington, and Wisco |   |
| ■ No                                    | . Go to line 3.  |   |  |   |
| ☐ Ye                                    | s. Did your spouse, former spou  | use, or legal equivalent live with  | you at the time?   |   |
| in line<br>Form                         | e 2 again as a codebtor only i   | f that person is a guarantor o  | r cosigner. Make sure you have lis   | s filing with you. List the person shown sted the creditor on Schedule D (Official alle D, Schedule E/F, or Schedule G to fil |
|   | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI                      | P Code  |  | he creditor to whom you owe the debt hedules that apply:  |
|   |  |   |  |   |
|   | Clarence Popernik  |   | ■ Schedule   | e D, line <b>2.1</b>  |
|   | 104 Valhalla Dr.<br>Poplar Grove, IL 61065   |   | ☐ Schedule   | e E/F, line   |
|   | i opiai Giove, iL 01003  |   | ☐ Schedule   |   |
|   |  |   | Mc Henry S   | Savings Bank  |

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| Fill                            | in this information to identify your o   | ase:                          |   |             |                 |   |                          |                                    |                 |
|---------------------------------|--|-------------------------------|---|-------------|-----------------|---|--------------------------|------------------------------------|-----------------|
|                                 | otor 1 Alice Poper   |                               |   |             |                 |   |                          |                                    |                 |
|                                 | otor 2   |                               |   |             | _               |   |                          |                                    |                 |
| Uni                             | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC            | CT OF ILLINOIS                                |             |                 |   |                          |                                    |                 |
|                                 | se number<br>  |                               |   |             |                 | Check if this is  An amende  A supplem  13 income | ed filing<br>ent showi   | ng postpetition<br>following date: |                 |
| <u>O</u> 1                      | fficial Form 106I  |                               |   |             |                 | MM / DD/ \  | YYYY                     | -                                  |                 |
| S                               | chedule I: Your Inc  | ome                           |   |             |                 |   |                          |                                    | 12/15           |
| sup <sub> </sub><br>spo<br>atta | as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment | are married and not filing wi | ng jointly, and your<br>ith you, do not inclu | spouse i    | s livi<br>natio | ing with you, incl<br>on about your sp            | ude infor<br>ouse. If m  | mation about<br>nore space is      | your<br>needed, |
| 1.                              | Fill in your employment information.   |                               | Debtor 1                                      |             |                 | Debtor 2  | 2 or non-f               | filing spouse                      |                 |
|                                 | If you have more than one job, attach a separate page with   | Employment status             | ☐ Employed                                    |             |                 | •   | Employed<br>Not employed |                                    |                 |
|                                 | information about additional employers.  | Occupation                    | ■ Not employed                                |             |                 | □ Not e   | mployed                  |                                    |                 |
|                                 | Include part-time, seasonal, or self-employed work.  | Employer's name               |   |             |                 |   |                          |                                    |                 |
|                                 | Occupation may include student or homemaker, if it applies.  | Employer's address            |   |             |                 |   |                          |                                    |                 |
|                                 |  | How long employed to          | here?   |             |                 |   |                          |                                    |                 |
| Par                             | t 2: Give Details About Mo   | nthly Income                  |   |             |                 |   |                          |                                    |                 |
|                                 | mate monthly income as of the duse unless you are separated.   | ate you file this form. If    | you have nothing to r                         | eport for a | any I           | ine, write \$0 in the                             | space. Ir                | nclude your no                     | n-filing        |
| -                               | u or your non-filing spouse have m<br>e space, attach a separate sheet to  |                               | ombine the informatio                         | n for all e | mplo            | oyers for that perso                              | on on the                | lines below. If                    | you need        |
|                                 |  |                               |   |             |                 | For Debtor 1                                      |                          | ebtor 2 or<br>ling spouse          |                 |
| 2.                              | List monthly gross wages, sala deductions). If not paid monthly,   |                               |   | 2.          | \$              | 0.00  | \$                       | N/A                                |                 |
| 3.                              | Estimate and list monthly over   | ime pay.                      |   | 3.          | +\$             | 0.00  | +\$                      | N/A                                |                 |
| 4.                              | Calculate gross Income. Add li   | ne 2 + line 3.                |   | 4.          | \$              | 0.00  | \$                       | N/A                                |                 |

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| Debt | or 1                           | Alice Popernik  |          | Ca    | ase number ( <i>if kr</i> | nown) |       |                  |                  |        |
|------|--------------------------------|---|----------|-------|---------------------------|-------|-------|------------------|------------------|--------|
|      |                                |   |          |       | For Debtor 1              |       | non-f | ebtor<br>iling s | spouse           |        |
|      | Cop                            | by line 4 here  | 4.       | 5     | §                         | 0.00  | \$    |                  | N/A              |        |
| 5.   | List                           | all payroll deductions:   |          |       |                           |       |       |                  |                  |        |
|      | 5a.                            | Tax, Medicare, and Social Security deductions   | 5a       | . 9   | 6                         | 0.00  | \$    |                  | N/A              |        |
|      | 5b.                            | Mandatory contributions for retirement plans  | 5b       | . 9   |                           | 0.00  | \$    |                  | N/A              |        |
|      | 5c.                            | Voluntary contributions for retirement plans  | 5c       | . 9   | 6                         | 0.00  | \$    |                  | N/A              |        |
|      | 5d.                            | Required repayments of retirement fund loans  | 5d       |       |                           | 0.00  | \$    |                  | N/A              |        |
|      | 5e.                            | Insurance   | 5e       |       |                           | 0.00  | \$    |                  | N/A              |        |
|      | 5f.                            | Domestic support obligations  | 5f.      |       | ·                         | 0.00  | \$    |                  | N/A              |        |
|      | 5g.                            | Union dues  | 5g       |       |                           | 0.00  |       |                  | N/A              |        |
|      | 5h.                            | Other deductions. Specify:  | _ 5h     | .+ \$ |                           | 0.00  | + \$  |                  | N/A              |        |
| 6.   | Add                            | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.       | \$    |                           | 0.00  | \$    |                  | N/A              |        |
| 7.   | Cal                            | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.       | \$    | ·                         | 0.00  | \$    |                  | N/A              |        |
| 8.   | List<br>8a.                    | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total               |          |       |                           |       |       |                  |                  |        |
|      | 8b.                            | monthly net income.  Interest and dividends   | 8a<br>8b |       |                           | 0.00  | \$    |                  | N/A              |        |
|      | 8c.                            | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce   |          |       |                           | 0.00  | ·     |                  | N/A              |        |
|      | 04                             | settlement, and property settlement.  | 8c       |       |                           | 0.00  | \$    |                  | N/A              |        |
|      | 8d.<br>8e.                     | Unemployment compensation Social Security   | 8d<br>8e |       |                           | 0.00  | \$    |                  | N/A<br>N/A       |        |
|      | 8f.                            | Other government assistance that you regularly receive  | 00       |       |                           | .00   | Ψ     |                  |                  |        |
|      | 01.                            | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Social Security Disability                               | 8f.      |       | 918                       | 3.00  | \$    |                  | N/A              |        |
|      | 8g.                            | Pension or retirement income  | <br>8g   | . \$  | 6                         | 0.00  | \$    |                  | N/A              |        |
|      | 8h.                            | Other monthly income. Specify:  | _ 8h     | .+ \$ |                           | 0.00  | + \$  |                  | N/A              |        |
| 9.   | Add                            | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.       | \$    | 918                       | 3.00  | \$    |                  | N/A              |        |
| 10   | Cald                           | culate monthly income. Add line 7 + line 9.   | 10.      | \$    | 918.00                    | + \$  |       | N/A              | = \$             | 918.00 |
|      |                                | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |          | Ψ—    | 310.00                    | .  •  |       | 17/7             | $    ^{ullet} -$ | 310.00 |
| 11.  | State<br>Included<br>the Do it | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify: | depe     |       |                           |       | •     |                  | ∍ J.<br>+\$      | 0.00   |
| 12.  |                                | If the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies  |          |       |                           |       |       | 12.              | \$               | 918.00 |
| 13.  | Do                             | you expect an increase or decrease within the year after you file this form   | ?        |       |                           |       |       | !                | Combine          |        |
| -    |                                | No. Ves Evolain:  |          |       |                           |       |       |                  |                  |        |

Official Form 106I Schedule I: Your Income page 2

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| E-11       | in this is formed in the last  |                |  |  |                               |  |                               |
|------------|--|----------------|--|--|-------------------------------|--|-------------------------------|
| Fill       | in this information to identify yo   | our case:      |  |  |                               |  |                               |
| Deb        | tor 1 Alice Poperr   | nik            |  |  |                               | k if this is:                              |                               |
| Deb        | tor 2  |                |  |  | _                             | An amended filing  A supplement show       | wing postpetition chapter     |
| (Spo       | ouse, if filing)   |                |  |  |                               |  | the following date:           |
| Unit       | ed States Bankruptcy Court for the   | : NORTH        | ERN DISTRICT OF ILLING                       | OIS  | -                             | MM / DD / YYYY                             |                               |
| 1          | e number<br>nown)  |                |  |  |                               |  |                               |
| O          | fficial Form 106J  |                |  |  | •                             |  |                               |
|            | chedule J: Your  |                | ises   |  |                               |  | 12/15                         |
| Be<br>info | as complete and accurate as<br>ormation. If more space is ne<br>nber (if known). Answer ever | possible.      | . If two married people ar                   | e filing together, be<br>form. On the top of | oth are equa<br>f any additio | ally responsible fo<br>onal pages, write y | or supplying correct          |
|            | Describe Your House  | hold           |  |  |                               |  |                               |
| 1.         | Is this a joint case?  |                |  |  |                               |  |                               |
|            | ■ No. Go to line 2.  ☐ Yes, <b>Does Debtor 2 live</b>  | in a sonar     | ate household?                               |  |                               |  |                               |
|            | □ No   | п а зерап      | ate nousenoid:                               |  |                               |  |                               |
|            |  | st file Offici | al Form 106J-2, Expenses                     | for Separate House                           | ehold of Debt                 | tor 2.                                     |                               |
| 0          |  | _              | . ,  | •  |                               |  |                               |
| 2.         | Do you have dependents?  | ■ No           |  |  |                               |  |                               |
|            | Do not list Debtor 1 and Debtor 2.   | ☐ Yes.         | Fill out this information for each dependent | Dependent's relate<br>Debtor 1 or Debto      |                               | Dependent's<br>age                         | Does dependent live with you? |
|            |  |                | ·  |  |                               |  | □ No                          |
|            | Do not state the dependents names.   |                |  |  |                               |  | □ Yes                         |
|            |  |                |  |  |                               |  | □ No                          |
|            |  |                |  |  |                               |  | ☐ Yes                         |
|            |  |                |  |  |                               |  | □ No                          |
|            |  |                |  |  |                               |  | ☐ Yes                         |
|            |  |                |  |  |                               |  | □ No                          |
| 2          | Do your expenses include   | _              |  |  |                               |  | ☐ Yes                         |
| 3.         | expenses of people other t   | han            | No   |  |                               |  |                               |
|            | yourself and your depende  | nts? ⊔         | Yes  |  |                               |  |                               |
| Par        | t 2: Estimate Your Ongoi   | na Month       | v Expenses                                   |  |                               |  |                               |
| Est        | imate your expenses as of your expenses as of a date after the lolicable date.               | our bankr      | uptcy filing date unless y                   |  |                               |  |                               |
| the        | lude expenses paid for with<br>value of such assistance an<br>ficial Form 106I.)             |                |  |  |                               | Your exp                                   | enses                         |
| ,01        |  |                |  |  |                               |  |                               |
| 4.         | The rental or home owners payments and any rent for the                                      |                |  | nclude first mortgage                        | e<br>4. \$                    |  | 450.00                        |
|            | If not included in line 4:   |                |  |  |                               |  |                               |
|            | 4a. Real estate taxes  |                |  |  | 4a. \$                        |  | 0.00                          |
|            | 4b. Property, homeowner's  | s, or renter   | 's insurance                                 |  | 4b. \$                        |  | 0.00                          |
|            | 4c. Home maintenance, re   | pair, and ι    | ıpkeep expenses                              |  | 4c. \$                        |  | 0.00                          |
| _          | 4d. Homeowner's associate  |                |  |  | 4d. \$                        |  | 0.00                          |
| 5.         | Additional mortgage payme  | ents for vo    | our residence, such as hor                   | me equity loans                              | 5. \$                         |  | 0.00                          |

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| Deb | otor 1         | Alice Popernik   | Case num | nber (if known) |        |
|-----|----------------|--|----------|-----------------|--------|
| 6.  | Utiliti        | ies:   |          |                 |        |
|     | 6a.            | Electricity, heat, natural gas   | 6a.      | \$              | 0.00   |
|     | 6b.            | Water, sewer, garbage collection   | 6b.      | \$              | 0.00   |
|     | 6c.            | Telephone, cell phone, Internet, satellite, and cable services   | 6c.      | \$              | 0.00   |
|     | 6d.            | Other. Specify:  | 6d.      | \$              | 0.00   |
| 7.  | Food           | and housekeeping supplies  |          | \$              | 200.00 |
| 8.  | Child          | care and children's education costs  | 8.       | \$              | 0.00   |
| 9.  | Cloth          | ing, laundry, and dry cleaning   | 9.       | \$              | 50.00  |
| 10. | Perso          | onal care products and services  | 10.      | \$              | 25.00  |
| 11. | Medi           | cal and dental expenses  | 11.      | \$              | 49.00  |
| 12. |                | sportation. Include gas, maintenance, bus or train fare.   | 10       | <b>•</b>        | 150.00 |
| 40  |                | ot include car payments.   | 12.      | ·               |        |
|     |                | rtainment, clubs, recreation, newspapers, magazines, and books   | 13.      | ·               | 0.00   |
|     |                | itable contributions and religious donations   | 14.      | \$              | 0.00   |
| 15. | Insur<br>Do no | ance. of include insurance deducted from your pay or included in lines 4 or 20.  |          |                 |        |
|     |                | Life insurance   | 15a.     | \$              | 38.00  |
|     |                | Health insurance   | 15b.     |                 | 0.00   |
|     |                | Vehicle insurance  | 15c.     | ·               | 0.00   |
|     |                | Other insurance. Specify:  | 15d.     | ·               | 0.00   |
| 16  |                | s. Do not include taxes deducted from your pay or included in lines 4 or 20.   |          | Ψ               | 0.00   |
|     | Speci          | ify:   | 16.      | \$              | 0.00   |
| 17. |                | Ilment or lease payments:  |          | _               |        |
|     |                | Car payments for Vehicle 1   | 17a.     | · <del></del>   | 0.00   |
|     |                | Car payments for Vehicle 2   | 17b.     | ·               | 0.00   |
|     |                | Other. Specify:  | 17c.     | ·               | 0.00   |
|     |                | Other. Specify:  | 17d.     | \$              | 0.00   |
| 18. |                | payments of alimony, maintenance, and support that you did not report as   | 18.      | \$              | 0.00   |
| 10  |                | cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). r payments you make to support others who do not live with you. | 10.      | \$              | 0.00   |
| 15. | Speci          | •  | 19.      | Ψ               | 0.00   |
| 20  |                | r real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>   |          | our Income      |        |
| _0. |                | Mortgages on other property  | 20a.     |                 | 0.00   |
|     |                | Real estate taxes  | 20b.     |                 | 0.00   |
|     | 20c.           | Property, homeowner's, or renter's insurance   | 20c.     | \$              | 0.00   |
|     |                | Maintenance, repair, and upkeep expenses   | 20d.     | · ·             | 0.00   |
|     |                | Homeowner's association or condominium dues  | 20e.     | \$              | 0.00   |
| 21. | Othe           | r: Specify:  | 21.      | +\$             | 0.00   |
| 00  |                | 1.   |          |                 |        |
| 22. |                | ulate your monthly expenses  |          |                 |        |
|     |                | Add lines 4 through 21.  |          | \$              | 962.00 |
|     |                | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |          | Ψ               |        |
|     | 22c. <i>F</i>  | Add line 22a and 22b. The result is your monthly expenses.   |          | \$              | 962.00 |
| 23. |                | ulate your monthly net income.   |          |                 |        |
|     |                | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.     | ·               | 918.00 |
|     | 23b.           | Copy your monthly expenses from line 22c above.  | 23b.     | -\$             | 962.00 |
|     | 23c.           | Subtract your monthly expenses from your monthly income.   |          |                 | 44.00  |
|     |                | The result is your monthly net income.   | 23c.     | \$              | -44.00 |
|     |                |  |          |                 |        |

### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ Yes.

Explain here: Debtor receives Link Card Assistance in the amount of \$51.00 per month. The amounts used on schedule J are net of this assistance.

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| Fill in this inform             | mation to identify you                           | r case:                     |                            |                         |   |
|---------------------------------|--|-----------------------------|----------------------------|-------------------------|---|
| Debtor 1                        | Alice Popernik                                   |                             |                            |                         |   |
|                                 | First Name                                       | Middle Name                 | Last Name                  |                         |   |
| Debtor 2<br>(Spouse if, filing) | First Name                                       | Middle Name                 | Last Name                  |                         |   |
| United States Ba                | ankruptcy Court for the:                         | NORTHERN DISTRICT           | OF ILLINOIS                |                         |   |
| Case number(if known)           |  |                             |                            |                         | ☐ Check if this is an amended filing                                    |
| Official Form                   | -  | an Individual               | Debtor's Sc                | hedules                 | 12/15   |
| If two married pe               | eople are filing togeth                          | er, both are equally respor | nsible for supplying corr  | ect information.        |   |
| obtaining money                 |  | in connection with a bank   |                            |                         | nent, concealing property, or<br>, or imprisonment for up to 20         |
| Sign                            | n Below  |                             |                            |                         |   |
| Did you pa                      | y or agree to pay son                            | neone who is NOT an attori  | ney to help you fill out b | ankruptcy forms?        |   |
| ■ No                            |  |                             |                            |                         |   |
| ☐ Yes. N                        | Name of person                                   |                             |                            |                         | ruptcy Petition Preparer's Notice,<br>and Signature (Official Form 119) |
|                                 | alty of perjury, I declar<br>e true and correct. | e that I have read the sumi | mary and schedules filed   | d with this declaration | n and   |
| X /s/ Alic                      | e Popernik                                       |                             | X                          |                         |   |
|                                 | Popernik   |                             | Signature of               | Debtor 2                |   |

Date

Signature of Debtor 1

Date March 1, 2018

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| Fill                 | in this inforr                        | nation to identify you  | r case:  |  |   |            |  |
|----------------------|---------------------------------------|---|--|--|---|------------|--|
| Deb                  | tor 1                                 | Alice Popernik  |  |  |   |            |  |
|                      |                                       | First Name  | Middle Name  | Last Name  | _                                       |            |  |
|                      | tor 2<br>use if, filing)              | First Name  | Middle Name  | Last Name  |   |            |  |
| Unit                 | ed States Ba                          | nkruptcy Court for the:                                       | NORTHERN DISTRICT                                      | OF ILLINOIS  |   |            |  |
| Cas<br>(if kno       | e number _                            |   |  |  |   |            | eck if this is an<br>ended filing                      |
| Sta<br>Be a<br>infor | s complete a                          | of Financial<br>and accurate as poss<br>nore space is needed, | ible. If two married people attach a separate sheet to | duals Filing for B<br>are filing together, both are<br>this form. On the top of an             | equally responsible                     |            |  |
| num                  |                                       | n). Answer every que<br>Details About Your Ma                 | รบอก.<br>arital Status and Where Yo                    | u Lived Before   |   |            |  |
|                      |                                       | r current marital statu                                       |  |  |   |            |  |
|                      | ■ Married □ Not man                   |   |  |  |   |            |  |
| 2.                   | During the I                          | ast 3 years, have you   | lived anywhere other than                              | where you live now?  |   |            |  |
|                      | No                                    |   |  |  |   |            |  |
|                      | ☐ Yes. Lis                            | st all of the places you                                      | lived in the last 3 years. Do n                        | ot include where you live nov  | ٧.                                      |            |  |
|                      | Debtor 1 Pr                           | ior Address:  | Dates Debtor 1<br>lived there                          | Debtor 2 Prior Ac  | Idress:                                 |            | Dates Debtor 2<br>lived there                          |
|                      |                                       |   |  | gal equivalent in a commur   |   |            |  |
|                      | ■ No<br>□ Yes. Ma                     | ake sure you fill out Sca                                     | hedule H: Your Codebtors (C                            | fficial Form 106H).  |   |            |  |
| Part                 | 2 Explai                              | in the Sources of You   | ır Income  |  |   |            |  |
|                      | Fill in the tota If you are filin  No | al amount of income yo  | ou received from all jobs and                          | ng a business during this yeall businesses, including part<br>e together, list it only once un | -time activities.                       | ous calend | ar years?  |
|                      |                                       |   | Debtor 1   |  | Debtor 2                                |            |  |
|                      |                                       |   | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions and<br>exclusions)  | Sources of incom<br>Check all that appl |            | <b>Gross income</b> (before deductions and exclusions) |
|                      |                                       |   |  |  |   |            |  |

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| 5. Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. |   |                        |  |  |  |  |   |  |   |  |   |  |  |
|--|---|------------------------|--|--|--|--|---|--|---|--|---|--|--|
|  | List ea                                   | ach s                  | ource and t                                | he gross inco  | me from ea   | ach source separa  | ately. Do n   | ot include income  | that you listed in lir  | ne 4.  |   |  |  |
|  | Πи  | lo.                    |  |  |  |  |   |  |   |  |   |  |  |
|  | _   |                        | Fill in the de                             | etails.  |  |  |   |  |   |  |   |  |  |
|  |   |                        |  |  | Dahtar 4   |  |   |  | Dahtan 0  |  |   |  |  |
|  |   |                        |  |  | Debtor 1<br>Sources of<br>Describe b   | of income<br>below.  | each  | s income from<br>source<br>e deductions and<br>ions)   | Sources of inc<br>Describe below  |  | Gross income<br>(before deductions<br>and exclusions) |  |  |
|  |   |                        | 1 of curre<br>led for bar                  | nt year until<br>nkruptcy:   | Social S<br>Disabilit  | •  |   | \$918.00   |   |  |   |  |  |
|  |   |                        |  |  | Social S<br>Disabilit  |  |   | \$11,016.00  |   |  |   |  |  |
|  |   |                        | lar year be<br>December                    |  | Social S<br>Disabilit  |  |   | \$11,016.00  |   |  |   |  |  |
|  |   |                        | During the No. Yes                         | 90 days beformed to the second of the second | personal, for you filed to each creditor. Do not payments to the condition of the condition | family, or househout<br>for bankruptcy, diversely to whom you pare to whom you pare to an attorney for to and every 3 years of an arthur consult for bankruptcy, diversely to whom you pare to whom | id you pay id a total of this bankri rs after tha umer deb id you pay | e."  of \$6,425* or more mestic support obliuptcy case. at for cases filed or ts.  of any creditor a total of \$600 or more an | al of \$6,425* or mo in one or more pay gations, such as ch or after the date of al of \$600 or more? | re?  /ments and the support and support an |   |  |  |
|  | Credi                                     | itor's                 | Name and                                   | d Address  |  | Dates of payme   | ent   | Total amount paid  | Amount you still owe  | Was this p   | payment for   |  |  |
| 7.   | Insider<br>of whice<br>a busing<br>alimon | rs incoch you ness ny. | clude your r<br>ou are an of<br>you operat | elatives; any ficer, director  | general par<br>, person in c<br>coprietor. 11  | rtners; relatives of control, or owner or  | any gene<br>of 20% or   | ral partners; partners more of their votin   |   | u are a gene<br>ny managing  | eral partner; corporations<br>agent, including one fo |  |  |
|  | Inside                                    | er's                   | Name and                                   | Address  |  | Dates of payme   | ent   | Total amount   | Amount you  | Reason fo  | or this payment                                       |  |  |
|  |   |                        |  |  |  |  |   | paid   | still owe   |  |   |  |  |

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Case number (if known) Document Debtor 1 Alice Popernik

| 8.  | Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cost   |   | ments or transfer a             | any property on a    | ccount of a d                 | ebt that benefited an               |  |
|-----|---|---|---------------------------------|----------------------|-------------------------------|-------------------------------------|--|
|     | ☐ Yes. List all payments to an insider  |   |                                 |                      |                               |                                     |  |
|     | Insider's Name and Address  | Dates of payment  | Total amount paid               | Amount you still owe | Reason for<br>Include cred    | this payment<br>litor's name        |  |
| Pa  | rt 4: Identify Legal Actions, Repossession  | ns, and Foreclosures  |                                 |                      |                               |                                     |  |
| 9.  | Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes.  |   |                                 |                      |                               |                                     |  |
|     | <ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>  |   |                                 |                      |                               |                                     |  |
|     | Case title Case number  | Nature of the case  | Court or agency                 |                      | Status of the case            |                                     |  |
|     | Cavalry Spv 1 LLC v Alice Popernik<br>17 SC 67  | Small Claims  | Union County (<br>Jonesboro, IL | Circuit Clerk        | ■ Pending □ On appe □ Conclud | eal                                 |  |
| 10. | Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  ☐ No. Go to line 11.  ☐ Yes. Fill in the information below.  Creditor Name and Address |   | erty repossessed, f             | oreclosed, garnis    | shed, attached                | d, seized, or levied?  Value of the |  |
|     |   | Explain what happene  | d                               |                      | property                      |                                     |  |
|     | Acsi Benton<br>Box 788<br>Benton, IL 62812  | ■ Property was reposse □ Property was foreclos □ Property was garnish | ober 2017                       | Unknown              |                               |                                     |  |
|     |   | ☐ Property was attached   | ed, seized or levied.           |                      |                               |                                     |  |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec  No Yes. Fill in the details.  |   | luding a bank or fir            | nancial institutior  | n, set off any a              | amounts from your                   |  |
|     | Creditor Name and Address   | Describe the action the   | e creditor took                 | Date<br>taker        | action was                    | Amount                              |  |
| 12. | Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a  ■ No □ Yes  |   | erty in the possess             |                      |                               | efit of creditors, a                |  |

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| Pa  | rt 5: List Certain Gifts and Contributio   | ns  |  |   |                           |  |  |  |  |  |
|-----|--|---|--|---|---------------------------|--|--|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift. |   |  |   |                           |  |  |  |  |  |
|     | Gifts with a total value of more than \$6 per person   | 000   | Describe the gifts   | Dates you gave the gifts                | Value                     |  |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:  | d   |  |   |                           |  |  |  |  |  |
| 14. | Within 2 years before you filed for bank  ■ No  □ Yes. Fill in the details for each gift or  | • • •   | did you give any gifts or contributions with a tota  | I value of more than                    | \$600 to any charity?     |  |  |  |  |  |
|     | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.   | total   | Describe what you contributed  | Dates you contributed                   | Value                     |  |  |  |  |  |
| Pa  | rt 6: List Certain Losses  |   |  |   |                           |  |  |  |  |  |
| 15. | Within 1 year before you filed for bankrior gambling?  No Yes. Fill in the details.  | uptcy o   | r since you filed for bankruptcy, did you lose anyt  | hing because of the                     | ft, fire, other disaster, |  |  |  |  |  |
|     | Describe the property you lost and how the loss occurred   | Includ  | ribe any insurance coverage for the loss le the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property. | Date of your loss                       | Value of property lost    |  |  |  |  |  |
| Pa  | rt 7: List Certain Payments or Transfe   | rs  |  |   |                           |  |  |  |  |  |
| 16. | consulted about seeking bankruptcy or  | prepar  | lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required        |   | erty to anyone you        |  |  |  |  |  |
|     | Yes. Fill in the details.  |   |  |   |                           |  |  |  |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not  | You   | Description and value of any property transferred  | Date payment<br>or transfer was<br>made | Amount of payment         |  |  |  |  |  |
|     | C. David Ward<br>1234 Douglas Road<br>Oswego, IL 60543<br>cdward1945@yahoo.com   |   | Attorney Fees  | 1-4-18                                  | \$450.00                  |  |  |  |  |  |
|     | 001 Debtorcc, Inc.<br>372 Summit Ave.<br>Jersey City, NJ 07306   |   |  | 1-15-18                                 | \$15.00                   |  |  |  |  |  |
| 17. | promised to help you deal with your cre  | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16. |  |   |                           |  |  |  |  |  |
|     | ■ No   |   |  |   |                           |  |  |  |  |  |
|     | Yes. Fill in the details.  |   | D  | Data                                    |                           |  |  |  |  |  |
|     | Person Who Was Paid<br>Address   |   | Description and value of any property transferred  | Date payment<br>or transfer was<br>made | Amount of payment         |  |  |  |  |  |

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|      | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details. |  |  |               |   |                               |  |  |  |
|------|--|--|--|---------------|---|-------------------------------|--|--|--|
|      | Person Who Received Transfer<br>Address<br>Person's relationship to you  | •  | Description and value of property transferred          |               | e any property or<br>ts received or debts<br>exchange | Date transfer was made        |  |  |  |
|      | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.   |  | y property to a s                                      | elf-settled t | rust or similar device                                | of which you are a            |  |  |  |
|      | Name of trust  | Description and v  | Description and value of the property transferred      |               |   |                               |  |  |  |
| Pari | 8: List of Certain Financial Accounts, Ins   | struments. Safe Denosi   | t Boxes, and Stor                                      | rage Units    |   | made                          |  |  |  |
|      | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, assoc No Yes. Fill in the details.  Name of Financial Institution and   | or other financial accou   | nts; certificates o                                    | of deposit; s |   | , ,                           |  |  |  |
|      | Address (Number, Street, City, State and ZIP Code)   | account number   | instrument   |               | closed, sold,<br>noved, or<br>ransferred              | before closing or<br>transfer |  |  |  |
|      | Anna State Bank<br>Anna, IL  | XXXX-  | ☐ Checking ☐ Savings ☐ Money Marke ☐ Brokerage ☐ Other |               | October 2017  | \$0.00                        |  |  |  |
|      | Do you now have, or did you have within 1 ycash, or other valuables?   | year before you filed for  | bankruptcy, any  | safe depos    | sit box or other deposi                               | itory for securities,         |  |  |  |
|      | Yes. Fill in the details.  |  |  |               |   |                               |  |  |  |
|      | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)            |  | Describe the  | e contents  | Do you still have it?         |  |  |  |
| 22.  | Have you stored property in a storage unit o   | or place other than your   | home within 1 y  | ear before y  | you filed for bankrupto                               | ey?                           |  |  |  |
|      | ■ No □ Yes. Fill in the details.   |  |  |               |   |                               |  |  |  |
|      | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  | Who else has or I<br>to it?<br>Address (Number, S<br>State and ZIP Code) |  | Describe the  | e contents  | Do you still have it?         |  |  |  |

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Debtor 1 Alice Popernik

| Pai   | t 9: Identify Property You Hold or Control for S  | Someone Else  |                                     |                    |  |
|---|---|---|-------------------------------------|--------------------|--|
| 23.   | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.        |   |                                     |                    |  |
|   | ■ No □ Yes. Fill in the details.  |   |                                     |                    |  |
|   | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Describe the property               | Value              |  |
| Pai   | t 10: Give Details About Environmental Informa  | ition   |                                     |                    |  |
| For   | the purpose of Part 10, the following definitions   | apply:  |                                     |                    |  |
| _   | Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances. | r, land, soil, surface water, ground                                      | - ·                                 |                    |  |
| Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize to own, operate, or utilize it, including disposal sites. |   |   |                                     |                    |  |
|   | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s   |   | s waste, hazardous substance, toxic | substance,         |  |
| Rep   | ort all notices, releases, and proceedings that yo  | ou know about, regardless of when   | n they occurred.                    |                    |  |
| 24.   | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?                        |   |                                     |                    |  |
|   | No  |   |                                     |                    |  |
|   | Yes. Fill in the details.   | •   |                                     | 5                  |  |
|   | Name of site Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State an ZIP Code)       | Environmental law, if you know it   | Date of notice     |  |
| 25.   | Have you notified any governmental unit of any release of hazardous material?   |   |                                     |                    |  |
|   | ■ No □ Yes. Fill in the details.  |   |                                     |                    |  |
|   | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it   | Date of notice     |  |
| 26.   | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.                           |   |                                     |                    |  |
|   | ■ No □ Yes. Fill in the details.  |   |                                     |                    |  |
|   | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case                  | Status of the case |  |
| Pai   | t 11: Give Details About Your Business or Con   | nections to Any Business  |                                     |                    |  |
| 27.   | <u> </u>  |   |                                     |                    |  |
|   | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   |   |                                     |                    |  |
|   | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  |   |                                     |                    |  |
|   | ☐ A partner in a partnership  |   |                                     |                    |  |
|   | ``  |   |                                     |                    |  |
|   | ☐ An officer, director, or managing executive of a corporation  |   |                                     |                    |  |
|   | ☐ An owner of at least 5% of the voting or equity securities of a corporation   |   |                                     |                    |  |

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|   | No. None of the above applies. Go to Part 12.  |  |  |  |  |
|---|--|--|--|--|--|
|   | Yes. Check all that apply above and fill in the details below for each business.   |  |  |  |  |
|   | Business Name<br>Address   | Describe the nature of the business            | Employer Identification number Do not include Social Security number or ITIN.                                      |  |  |
|   | (Number, Street, City, State and ZIP Code)   | Name of accountant or bookkeeper               | Dates business existed   |  |  |
| 28.   | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |  |  |  |  |
|   | ■ No □ Yes. Fill in the details below.   |  |  |  |  |
|   | Name<br>Address<br>(Number, Street, City, State and ZIP Code)  | Date Issued                                    |  |  |  |
| Pai   | t 12: Sign Below   |  |  |  |  |
| are<br>with<br>18 U                                     | true and correct. I understand that making a a bankruptcy case can result in fines up to I.S.C. §§ 152, 1341, 1519, and 3571.  | false statement, concealing property, or o     | declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both. |  |  |
| /s/ Alice Popernik Alice Popernik Signature of Debtor 1 |  | Signature of Debtor 2                          |  |  |  |
| Da  | e <u>March 1, 2018</u>   | Date   |  |  |  |
| Did<br>■ N  | •  | ent of Financial Affairs for Individuals Filin | g for Bankruptcy (Official Form 107)?  |  |  |
| <b>.</b>  |  |  |  |  |  |
|   | you pay or agree to pay someone who is not<br>to   | an attorney to help you fill out bankruptc     | y forms?   |  |  |

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| Fill in this inform             | nation to identify your               | case.                 |  |                   |                         |
|---------------------------------|---------------------------------------|-----------------------|--|-------------------|-------------------------|
| Debtor 1                        |                                       | jase.                 |  |                   |                         |
| Debior                          | Alice Popernik First Name             | Middle Name           | Last Name  | -                 |                         |
| Debtor 2<br>(Spouse if, filing) | First Name                            | Middle Name           | Last Name  | -                 |                         |
|                                 | nkruptcy Court for the:               |                       | TRICT OF ILLINOIS  |                   |                         |
| Officed States Ba               | Tikrupicy Court for the.              | NORTHERN DIS          | TRICT OF ILLINOIS  | -                 |                         |
| Case number _                   |                                       |                       |  |                   | Check if this is an     |
| (,                              |                                       |                       |  |                   | amended filing          |
|                                 |                                       |                       |  |                   |                         |
| Official Fo                     | rm 108                                |                       |  |                   |                         |
|                                 |                                       | n for Indiv           | viduals Filing Under Cha   | ntor 7            | 40/45                   |
| Statemen                        | it of intentio                        | ii ioi iiidiv         | riduals I lillig Officer Cha   | ptei 1            | 12/15                   |
| If you are an indi              | vidual filing under cha               | pter 7, you must fil  | I out this form if:  |                   |                         |
| creditors have                  | e claims secured by yo                | ur property, or       |  |                   |                         |
|                                 | ed personal property a                |                       |  |                   |                         |
|                                 |                                       |                       | you file your bankruptcy petition or by the da<br>e time for cause. You must also send copies t  |                   |                         |
| on the                          | form                                  |                       | ·  |                   | •                       |
|                                 |                                       | r in a joint case, bo | oth are equally responsible for supplying corre  | ect information   | . Both debtors must     |
| sign an                         | d date the form.                      |                       |  |                   |                         |
|                                 |                                       |                       | s needed, attach a separate sheet to this form   | . On the top of   | any additional pages,   |
| write yo                        | our name and case nur                 | nber (ii known).      |  |                   |                         |
| Part 1: List Yo                 | our Creditors Who Have                | e Secured Claims      |  |                   |                         |
| 1. For any credite              | ors that you listed in Pa             | art 1 of Schedule D   | : Creditors Who Have Claims Secured by Pro   | perty (Official F | Form 106D), fill in the |
| information be                  | elow.<br>editor and the property t    | hat is collateral     | What do you intend to do with the property   | that Did          | you claim the property  |
|                                 |                                       |                       | secures a debt?  |                   | exempt on Schedule C?   |
|                                 |                                       |                       |  |                   |                         |
| Creditor's M                    | lc Henry Savings Ba                   | nk                    | ■ Surrender the property.  | □N                | lo                      |
| name:                           |                                       |                       | ☐ Retain the property and redeem it.   |                   |                         |
| Description of                  | hoot                                  |                       | Retain the property and enter into a   | ■ Y               | es                      |
| property                        | Boat purchased in                     | 2010 (a               | Reaffirmation Agreement.   |                   |                         |
| securing debt:                  |                                       |                       | ☐ Retain the property and [explain]:   |                   |                         |
| 200ag 200a.                     | possession of deb                     |                       |  |                   |                         |
|                                 | estranged husban                      |                       |  |                   |                         |
|                                 | no further informa                    |                       |  |                   |                         |
|                                 | not in contact with                   |                       |  |                   |                         |
|                                 | estranged husban<br>never made a payr |                       |  |                   |                         |
|                                 | the loan is curr                      | nent on it but        |  |                   |                         |
|                                 | the loan is curi                      |                       |  |                   |                         |
|                                 | our Unexpired Persona                 |                       |  |                   |                         |
|                                 |                                       |                       | in Schedule G: Executory Contracts and Une<br>expired leases are leases that are still in effect |                   |                         |
|                                 |                                       |                       | the trustee does not assume it. 11 U.S.C. § 36   |                   | nas not yet enaea.      |
| Describe vour u                 | nexpired personal pro                 | perty leases          |  | Will the le       | ease be assumed?        |
| •                               |                                       | •                     |  | 23111 0110 10     |                         |
| Lessor's name:                  | RNR of Misso                          | ıri LLC               |  | ■ No              |                         |
|                                 |                                       |                       |  |                   |                         |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| De | Alice Popernik  | Case number (if known)  |
|----|---|---|
|    |   | ☐ Yes   |
|    | escription of leased Rental Purchase Arreement operty:  |   |
| Pa | rt 3: Sign Below  |   |
|    | der penalty of perjury, I declare that I have indicated my into<br>perty that is subject to an unexpired lease. | ention about any property of my estate that secures a debt and any personal |
| Χ  | /s/ Alice Popernik  | X   |
|    | Alice Popernik  | Signature of Debtor 2   |
|    | Signature of Debtor 1   |   |
|    | -   |   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-05838 Doc 1 Filed 03/01/18 Entered 03/01/18 10:05:44 Desc Main Document Page 43 of 48

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

| In re | Alice Popernik   | (  |  | Case No.  |                                     |
|-------|--|--|--|---|-------------------------------------|
|       |  |  | Debtor(s)  | Chapter   | 7                                   |
|       | DIS  | CLOSURE OF COMP  | ENSATION OF ATTOR  | NEY FOR DE  | EBTOR(S)                            |
|       | compensation paid to   | me within one year before the fi   | 16(b), I certify that I am the attorned ling of the petition in bankruptcy, on of or in connection with the bank   | or agreed to be paid  | to me, for services rendered or to  |
|       | •  |  |  |   | 450.00                              |
|       | Prior to the filing  | g of this statement I have receive   | ed   | \$  | 450.00                              |
|       | Balance Due  |  |  | \$  | 0.00                                |
| 2.    | The source of the cor  | mpensation paid to me was:   |  |   |                                     |
|       | Debtor   | ☐ Other (specify):   |  |   |                                     |
| 3.    | The source of compe  | nsation to be paid to me is:   |  |   |                                     |
|       | Debtor   | ☐ Other (specify):   |  |   |                                     |
| 4.    | ■ I have not agreed  | to share the above-disclosed cor   | mpensation with any other person t   | inless they are mem   | bers and associates of my law firm. |
|       |  |  | nsation with a person or persons w<br>names of the people sharing in the   |   |                                     |
| 5.    | In return for the above  | ve-disclosed fee, I have agreed to   | render legal service for all aspects   | of the bankruptcy c   | ase, including:                     |
|       | <ul> <li>b. Preparation and fi</li> <li>c. Representation of</li> <li>d. [Other provisions</li> <li>Negotiatio</li> <li>reaffirmati</li> </ul> | iling of any petition, schedules, so<br>the debtor at the meeting of cred<br>as needed]<br>ans with secured creditors to | ndering advice to the debtor in dete<br>tatement of affairs and plan which<br>litors and confirmation hearing, an<br>o reduce to market value; exe<br>tions as needed; preparation<br>household goods. | may be required;<br>d any adjourned hea<br>mption planning; | rings thereof;                      |
| 6.    |  |  | fee does not include the following hargeability actions and/or ad  |   | ngs.                                |
|       |  |  | CERTIFICATION  |   |                                     |
|       | I certify that the foregonkruptcy proceeding   |  | any agreement or arrangement for   | payment to me for re  | epresentation of the debtor(s) in   |
|       | March 1, 2018  | -  | /s/ C. David Ward  |   |                                     |
| _     | Date   |  | C. David Ward  |   | -                                   |
|       |  |  | Signature of Attorney  | V   |                                     |
|       |  |  | C. David Ward<br>1234 Douglas Roa  | ad  |                                     |
|       |  |  | Oswego, IL 60543   |   |                                     |
| 1     |  |  | 620 EE4 206E Ea  |   |                                     |

cdward1945@yahoo.com

Name of law firm

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## BANKRUPTCY RETAINER AGREEMENT

18 18 or 18 or 18 or 18 You have asked our firm to act as your attorneys. This agreement sets forth the terms under which we will represent you and shall become effective as soon as it is signed by both of us and we are paid as set forth herein. We reserve the right to terminate our attorney client relationship for non-payment of fees or costs and or the failure to provide the documents requests in a timely fashion. We do not advance any costs or expenses

**COSTS AND EXPENSES**. The following are the anticipated costs and expenses which I. may be incurred in your case: The case can not be filed without these fees being paid.

\$335.00 COURT COSTS: Initial filing fee to clerk of court A. \$33.00 / \$66.00 **CREDIT REPORT:** В. \$368.00 / \$401.00 **TOTAL COSTS:** C. \$450.00

FLAT FEE. The legal flat fee is: Π.

\$818.00 / \$851.00

TOTAL DUE. III.

An Initial payment \$133.00/\$166.00 leaves \$685.00 due to file case.

PRIVACY WAIVER. Many of the documents we will require and much of the IV. information and due diligence we will have to complete will require our investigation into your personal financial records and all other venues of public data. This could include the Secretary of State, the Criminal Court records, the Civil Court records, the tax assessor's records, and all other sources of information that may be available through the internet (including IRS, IDOR, and census bureau) and other public sources of information. Said information will be used solely on your behalf and as is necessary to adequately represent you in the bankruptcy proceedings filed on your behalf. Should we not represent you said information will not be disclosed to any other person without your permission unless ordered to do so by a court with jurisdiction. Once this information is received we will have to include it in the paperwork necessary to complete the bankruptcy process on your behalf. You hereby authorize us to obtain the necessary information from any source available and further agree to execute any necessary waiver and or permissions required by any third party providers of this information.

WE UNDERSTAND THAT THE CASE WILL NOT FILED UNLESS WE PROVIDE THE REQUIRED DOUMENTATION ON TIME AND MAKE THE PAYMENTS AGREED TO ON TIME. SAID FAILURE TO FILE MAY DEPRIVE US OF THE PROTECTION OF THE BANKRUPTCY SYSTEM AND COULD ADVERSELY AFFECT US.

WE UNDERSTAND THAT THE EXECUTION OF THIS AGREEMENT DOES NOT GUARANTEE THAT WE QUALIFY FOR A CHAPTER 7 BANKRUPTCY. NO REPRESENTATION AS TO WHICH CHAPTER WE QUALIFY FOR IS BEING MADE UNTIL THE MEANS TEST CALCULATION IS COMPLETED AND OTHER QUALIFICATIONS FACTORS ARE MET.

IF YOU FAIL TO APPEAR AT THE 341 MEETING AND/OR DO NOT BRING VII. YOUR PHOTO ID AND SOCIAL SECURITY CARD TO THE MEETING AND IT IS NOT HELD, WE WILL CHARGE AN ADDITOINAL \$100.00 FEE TO ATTEND THE NEXT MEETING WHICH MUST BE PAID BEFORE ATTENDING THE MEETING.

| Dated: | /- | 4 | -1 | 8 |
|--------|----|---|----|---|
|        |    |   |    |   |

ILLINI LEGAL SERVICES: \_\_\_\_\_\_ A David (lare)

Alice 7 Departik

- WHAT WE WILL DO FOR YOU. Illini Legal Services will provide legal and other services as follow: VII. PEOPLE INVOLVED. The full bankruptcy process involved many skilled people who work on various stages of your case. Some of the people involved are:
- ATTORNEY. The Attorneys at Illini Legal Services will provide over sight in all aspects 1. of your case, meet with you as is necessary and attend those creditors meeting and court appearances as are agreed. Should legal fees be charges the current hourly rate is \$360.00 per hour.
- PARALEGAL. Illini Legal Services uses the services of paralegals. Paralegals are highly skilled non-attorneys who provide specialized support services. Paralegals are supervised by Attorneys and provide the support services to facilitate the document preparation, information gathering, and other essential tasks necessary in the orderly completion of your Bankruptcy. Should fees be charged they will be \$180.00 per hour.
- SECRETARIAL AND OTHER SUPPORT. Other people are also engaged in helping your successful trip through the bankruptcy process. These include secretaries, and other services. There is no separate hourly charge for these services and their costs are included in the hourly fees charged by Illini Legal Services.
- SERVICES PROVIDED. Once you have become our client we will provide among other services the following:
- EXPLANATION OF BANKRUPTCY. We will explain the bankruptcy process and the difference between the types of bankruptcy to you so that you can make a reasoned decision as to what you want to do. NECESSARY PAPERWORK. We will provide all of the paper work necessary for you 2..

to complete the bankruptcy process. This includes the following:

CREDITOR'S MEETING. In both Chapter 7 and Chapter 13 there is a mandatory meeting with the bankruptcy trustee know as the 341 meeting. We will prepare for and attend this meeting with you. COURT APPEARANCES. If there are necessary court appearances we will prepare for

and attend them.

- a. Mundane Court Appearances. Mundane court appearances are routine court matters. They are held on court motion calls. Said mundane matters do not include set evidentiary hearings, adversary proceedings, and or other contested matters of an unusual nature.
- b. Adversary Proceedings and highly contested Court Appearances. Adversary Proceedings and highly contested Court Appearances are not included in the fee quoted above and there will be extra charges which will be discussed with you prior to the attendance of any court appearance. In most instances additional legal fees will have to be agreed to and paid.
- AMENDMENTS OF SCHEDULES. We will prepare and file on your behalf any necessary amendments to the paperwork. There may be an additional costs for this service with the court system which your will have to pay prior to the amendments.
- WHAT WE WILL NOT DO FOR YOU. Without further agreement between Illini and you, there are several things that Illini has not agreed to do. These include:
- ADVERSE PROCEEDINGS, CONTESTED MOTIONS, & OBJECTIONS. . Should any person, creditor, and or the trustee, file an adversary proceeding, file a contested motion, contest an exemption, or object to a claim, we have not agreed to represent you. Should this happen there will be additional fees, costs and expenses which we will have to agree to and will have to be paid. If we cannot come to an agreement we will withdraw as your attorney.
- ACTIONS CAUSED BY YOUR FAILURE TO LIVE UP TO YOUR AGREED RESPONSIBILITIES. Should you fail to do any of those things you have agreed to do as set forth in this agreement we have not agreed to represent you. Should this happen there will be additional fees, costs and expenses which we will have to agree to and will have to be paid. If we cannot come to an agreement we will withdraw as your attorney. WHAT YOU MUST DO FOR US. It is immensely important that we have your complete cooperation. All items must be paid, in advance, to Illini and a failure to pay same will result in our withdrawal from your case and may cause documents which must be filed in a timely fashion to be filed late or not all. We are not responsible for the consequences of your failure to get to us the information, whether written, or otherwise, in a timely fashion nor will we represent you in any of the proceedings occasioned by your failure, without further agreement about the representation and the payment of expenses, costs and fees. We cannot do our job for you unless we have the information to be able to deal with in a timely fashion. Not limiting the above, you must do the following:
  - ATTEND THE CREDITOR'S MEETING AND ALL COURT PROCEEDINGS ON TIME. IF YOU FAIL TO APPEAR OR DO NOT HAVE YOUR SOCIAL SECURITY CARD AND PHOTO ID AND WE HAVE TO MAKE AN EXTRA APPEARANCE WE WILL CHARGE AN ADDITIONAL \$100.00 WHICH MUST BE PAID BEFORE THE NEXT MEETING.
  - PROVIDE ALL DOUMENTRATION REQUESTED TO US WHEN WE REQUEST IT. В. LET US KNOW OF ANY CHANGES IN YOUR CIRCUMSTANCES AS THEY MAY C.
  - OCCUR. COOPERATE IN A TIMELY FASHION WITH THIRD PARTIES NECESSARY TO THE E. SUCCESSFUL COMPLETTION OF YOUR CASE

#### United States Bankruptcy Court Northern District of Illinois

| In re | Alice Popernik                             |  | Case No.                 |                     |
|-------|--|--|--------------------------|---------------------|
|       | ·  | Debtor(s)                                | Chapter 7                |                     |
|       | VF   | ERIFICATION OF CREDITOR M                | MATRIX                   |                     |
|       |  | Number of                                | f Creditors:             | 14                  |
|       | The above-named Debtor(s) (our) knowledge. | ) hereby verifies that the list of credi | itors is true and correc | t to the best of my |
| Date: | March 1, 2018                              | /s/ Alice Popernik                       |                          |                     |

Aargon Agency Attn: Bankruptcy Department 8668 Spring Mountain Rd Las Vegas, NV 89117

Acsi Benton Box 788 Benton, IL 62812

Appelles 3700 Corporate Drive, Ste 240 Columbus, OH 43231

Cavalry Portfolio Services Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595

Clarence Popernik 104 Valhalla Dr. Poplar Grove, IL 61065

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